Fill in this i	nformation to ide	entify your case a	and this filing:			
Debtor 1	BLAINE	ANTHONY	SCHULER			
	First Name	Middle Name	Last Name			
Debtor 2	KARIE	DOREEN	SCHULER			
(Spouse, if filin	ng) First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for t	he: DISTRICT OF M	IONTANA			
Case number	19-60044			□ Chook	if this is an	
(if known)				_	led filing	
Official For	m 106A/B					
	A/B: Property				12/15	
Part 1: C	rm. On the top of an	y additional pages, w	rite your name and case nu	re space is needed, attach a smber (if known). Answer evenestate You Own or Have	ry question.	
✓ Yes. \	Where is the property	?				
1.1. 229 17TH AVE Street address, if av	E NW vailable, or other description	Check all th	e property? nat apply. family home	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ims on Schedule D:	
			or multi-unit building minium or cooperative	Current value of the entire property?	Current value of the portion you own?	
GREAT FALLS		04 Manufa	actured or mobile home	\$142,700.00	\$142,700.00	
CASCADE	·		nent property pare	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
County			n interest in the property?	FEE SIMPLE OWNERS		
		Check one. ☐ Debtor ☐ Debtor ☑ Debtor ☑ Debtor	1 only	Check if this is comm (see instructions)	nunity property	
			mation you wish to add abo	ut this item, such as local	_	
	•	•	f your entries from Part 1, in te that number here		\$142,700.00	
Part 2:	Describe Your Ve	hicles		•		
-		•		re registered or not? Include secutory Contracts and Unexpi	•	
3. Cars, vans	, trucks, tractors, sp	ort utility vehicles, m	notorcycles			
□ No √ Yes						

Debt Debt	_	INE ANTHONY SCHU IE DOREEN SCHULE		se number (if known) 19-6	60044
3.1. Make Mode Year Appr	el:	INFINITY QX56 2008	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim Current value of the entire property?	ims on Schedule D: ss Secured by Property. Current value of the portion you own?
	er information:	QX56	Check if this is community property (see instructions)	\$10,525.00	<u>\$10,525.00</u>
Othe	el:	CHEVY 2004 ge:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$2,000.00	ims on Schedule D:
Othe	el:	ircraft, motor homes, A	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) TVs and other recreational vehicles, other vehicles are sometimes on the contract of the property of o		ims on Schedule D:
		•	ou own for all of your entries from Part 2, incluing For Part 2. Write that number here		\$12,525.00
			al and Household Items e interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examples: M	scribe REFRIDGE, S WASHER/DR 5 BEDS/BEDI	linens, china, kitchenware STOVE,MICROWAVE,DISHWASHER, YER, POTS&PANS,TABLE/CHAIRS, DING,NIGHTSTAND,5 DRESSERS,SOFA,I ABLES,3 LAMPS,COMPUTER	RECLINER,2 EBD TABL	\$1,950.00 ES,
7.	•	usic collections; electroni	lio, video, stereo, and digital equipment; compute c devices including cell phones, cameras, media	· •	

	tor 1 tor 2	BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER Case number (if known	um) 19-60044
		Case number (ii know	MI)
8.		tibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	;
	✓ No ☐ Yes	s. Describe	
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, canoes and kayaks; carpentry tools; musical instruments	skis;
	☐ No ✓ Yes	s. Describe 3 BIKES, CAMPING EQUIPMENT, 3 FIREARMS	\$650.00
10.	Firearn Exampl	ns les: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No	s. Describe	
11.	Clothes Example	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ✓ Yes	s. Describe WEARING APPAREL	\$200.00
12.	Jewelry Example	y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch gold, silver	es, gems,
	□ No ✓ Yes	s. Describe WEDDING RING & BAND	\$200.00
13.		rm animals //es: Dogs, cats, birds, horses	
	✓ No ☐ Yes	s. Describe	
14.	Any oth	her personal and household items you did not already list, including any health aids you talest	
	_	s. Give specific prmation	
15.		e dollar value of all of your entries from Part 3, including any entries for pages you have ed for Part 3. Write the number here	\$3,000.00
P	art 4:	Describe Your Financial Assets	
Do	you own	n or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Exampl	les: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you fil petition	e your
	□ No ☑ Yes	s	\$20.00

	tor 1 tor 2	BLAINE ANTHOI KARIE DOREEN				Case numb	er (if known) 1	9-60044	
17.			es, and oth		cial accounts; certificates of dep ilar institutions. If you have mult	posit; shares in cre	dit unions,		
	□ No ☑ Ye	S		Instituti	ion name:				
	17	7.1. Checking acco	ount:	Check	king account				Unknown
18.		, mutual funds, or p les: Bond funds, inve	-		ocks with brokerage firms, money ma	arket accounts			
	✓ No □ Ye	s	Institution	or issu	uer name:				
19.	an inte	rest in an LLC, part			incorporated and unincorpora nt venture	ated businesses, i	including		
	info	s. Give specific ormation about m	Name of e	entity:			% of ownership	p:	
20.	Negotia	able instruments inclu	ude persor	nal chec	er negotiable and non-negotial cks, cashiers' checks, promissor nnot transfer to someone by sign	ry notes, and mone	•		
	info	s. Give specific ormation about	Issuer na	me:					
21.		nent or pension acc les: Interests in IRA, profit-sharing pla	ERISA, K	eogh, 4	401(k), 403(b), thrift savings acc	ounts, or other per	nsion or		
	_	s. List each	Type of acc	count:	Institution name:				
22.	Your st Examp		posits you	have m	nade so that you may continue s iid rent, public utilities (electric, ç				
	✓ No				Look to the constant of the third				
23.	_	s ies (A contract for a	specific p	eriodic	Institution name or individual: payment of money to you, eithe	r for life or for a nu	mber of years)		
	☑ No								
24.		ts in an education I .C. §§ 530(b)(1), 529			nt in a qualified ABLE program 1).	n, or under a qual	ified state tuition	n program.	
	✓ No		Inatitution		and description. Separately file	the records of one	interests 11 II	C C C E21/c)	
25.	Trusts		interests	in prop	perty (other than anything liste			.5.0. 9 521(6)	
	✓ No ☐ Ye	•							
26.	Patent	s, copyrights, trade			erets, and other intellectual pro		•		
	✓ No		names, we	ensiles,	, proceeds from royalties and lic	ensing agreement	5		
		s. Give specific ormation about them							

	tor 1 tor 2	KARIE DOREEN SCHULER	Case number (if known)	19-60044
27.	Example No Yes	es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative associa Give specific rmation about them	tion holdings, liquor licenses, profession	nal licenses
Mor	ney or pi	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	abo you	Give specific information ut them, including whether already filed the returns		Federal: State:
	and	the tax years		Local:
29.	•	support es: Past due or lump sum alimony, spousal support, child su	pport, maintenance, divorce settlement,	, property settlement
	س	. Give specific information	Alimony:	
			Maintenand	ce:
			Support:	
			Divorce set	ttlement:
			Property se	ettlement:
30.	Example No	mounts someone owes you es: Unpaid wages, disability insurance payments, disability b compensation, Social Security benefits; unpaid loans you . Give specific information		·
31.	Example No Yes	s in insurance policies es: Health, disability, or life insurance; health savings accour Name the insurance epany of each policy list its value	nt (HSA); credit, homeowner's, or renter's Beneficiary:	's insurance Surrender or refund value:
32.	If you a entitled	erest in property that is due you from someone who has one the beneficiary of a living trust, expect proceeds from a life to receive property because someone has died		
		. Give specific information		
33.	Examp	against third parties, whether or not you have filed a lawses: Accidents, employment disputes, insurance claims, or rig		
	✓ No ☐ Yes	. Describe each claim		
34.	rights t	ontingent and unliquidated claims of every nature, includ o set off claims	ing counterclaims of the debtor and	
	✓ No ☐ Yes	. Describe each claim		

	otor 1 otor 2	BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER	Case number (if known)19-6	0044
35.	Any fir	nancial assets you did not already list		
	✓ No	s. Give specific information		
36.		e dollar value of all of your entries from Part 4, including any entries foed for Part 4. Write that number here		\$20.00
P	art 5:	Describe Any Business-Related Property You Own or Have	ve an Interest In. List any	real estate in Part 1.
37.	Do you	ı own or have any legal or equitable interest in any business-related pr	roperty?	
		s. Go to Part 6.		
20	* 	the state of the s		Current value of the portion you own? Do not deduct secured claims or exemptions.
30.		nts receivable or commissions you already earned		
	✓ No ☐ Yes	s. Describe		
39.		equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax idesks, chairs, electronic devices	machines, rugs, telephones,	
	□ No ☑ Yes	s. Describe DESK, FILING CABINET, PRINTER		\$200.00
40.	Machir	nery, fixtures, equipment, supplies you use in business, and tools of yo	our trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ory		
	✓ No	s. Describe		
42.	Interes	sts in partnerships or joint ventures		
	✓ No ☐ Yes	s. Describe Name of entity:	% of ownership:	
43.	Custor	mer lists, mailing lists, or other compilations		
	✓ No ☐ Yes	s. Do your lists include personally identifiable information (as defined No Yes. Describe	in 11 U.S.C. § 101(41A))?	
44.	Any bu	usiness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries fo		\$200.00

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Debtor 1 Debtor 2		BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER Case number (if	Case number (if known) 19-60044		
P		Describe Any Farm- and Commercial Fishing-Related Property You Ow If you own or have an interest in farmland, list it in Part 1.	n or Ha	lave an Interest In.	
46.	-	ι own or have any legal or equitable interest in any farm- or commercial fishing-related μ	oroperty	y?	
		s. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.	
47.	Farm a	inimals /es: Livestock, poultry, farm-raised fish			
	✓ No				
48.	Crops-	-either growing or harvested			
	_	s. Give specific prmation			
49.	Farm a	and fishing equipment, implements, machinery, fixtures, and tools of trade			
	✓ No ☐ Yes				
50.	Farm a	nd fishing supplies, chemicals, and feed			
	✓ No ☐ Yes				
51.	Any fa	rm- and commercial fishing-related property you did not already list			
		s. Give specific prmation			
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have ed for Part 6. Write that number here		\$0.00	
P	art 7:	Describe All Property You Own or Have an Interest in That You Did Not	List A	Above	
53.		I have other property of any kind you did not already list? Jes: Season tickets, country club membership			
	✓ No ☐ Yes	s. Give specific information.			
54.	Add th	e dollar value of all of your entries from Part 7. Write that number here		→ \$0.00	

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) __19-60044 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2..... \$142,700.00 56. Part 2: Total vehicles, line 5 \$12,525.00 57. Part 3: Total personal and household items, line 15 \$3,000.00 58. Part 4: Total financial assets, line 36 \$20.00 59. Part 5: Total business-related property, line 45 \$200.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal \$15,745.00 62. Total personal property. Add lines 56 through 61...... \$15,745.00 property total \$158,445.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Fill in this information to identify your case:								
Debtor 1 BLAINE ANTHONY SCHULER First Name Middle Name Last Name								
Debtor 2 KARIE DOREEN SCHULER								
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF MONTANA								
Case number 19-60044								
(if known)								

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part	identify the Property You Cl	aim as Exempt			
	You are claiming state and federal nonbar You are claiming federal exemptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.		·
	r any property you list on Schedule A/B the escription of the property and line on	nat you claim as exen Current value of	•	ount of the	Specific laws that allow exemption
	ele A/B that lists this property	the portion you own	exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	rom Check only one box for each exemption		
	scription: TH AVE NW	\$142,700.00		\$8,416.21 100% of fair market	Mont. Code Ann. §§ 70-32-104, 105, & 25-13-615
Line fror	m Schedule A/B: 1.1			value, up to any applicable statutory limit	
	scription:	\$10,525.00	Ø	\$0.00 100% of fair market	Mont. Code Ann. § 25-13-609(2)
	m Schedule A/B: 3.1		Ш	value, up to any applicable statutory limit	

3.	Are you claiming a homestead exemption of more than \$160,375?							
	(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							
	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No							
	Yes							

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$2,000.00 \$2,000.00 Mont. Code Ann. § 25-13-609(2) \square **2004 CHEVY** 100% of fair market value, up to any Line from Schedule A/B: 3.2 applicable statutory limit Brief description: Unknown \$0.00 Mont. Code Ann. § 25-13-609(2) $\overline{\mathbf{Q}}$ 1996 GMC 100% of fair market value, up to any Line from Schedule A/B: 3.3 applicable statutory limit Brief description: Mont. Code Ann. § 25-13-609(1) \$1,950.00 \$1,950.00 $\overline{\mathbf{Q}}$ REFRIDGE, 100% of fair market П STOVE, MICROWAVE, DISHWASHER, value, up to any applicable statutory WASHER/DRYER, POTS&PANS, TABLE/CHAIRS, limit 5 BEDS/BEDDING, NIGHTSTAND, 5 DRESSERS, SOFA, RECLINER, 2 EBD TABLES, **3 COFFEE TABLES,3 LAMPS,COMPUTER** Line from Schedule A/B: Brief description: \$650.00 \$650.00 Mont. Code Ann. § 25-13-609(1) \square 3 BIKES, CAMPING EQUIPMENT, 3 100% of fair market **FIREARMS** value, up to any Line from Schedule A/B: applicable statutory limit Brief description: \$200.00 Mont. Code Ann. § 25-13-609(1) \$200.00 $\overline{\mathbf{Q}}$ **WEARING APPAREL** 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$200.00 \$200.00 Mont. Code Ann. § 25-13-609(1) **WEDDING RING & BAND** 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$200.00 Mont. Code Ann. § 25-13-609(1) \$200.00 $\overline{\mathbf{Q}}$ **DESK, FILING CABINET, PRINTER** 100% of fair market value, up to any Line from Schedule A/B: applicable statutory limit

						•		
Fill in this inf	ormation t	o identify	your case	et				
Debtor 1	BLAINE		THONY	SCHULER				
	First Name	Mid	dle Name	Last Name				
Debtor 2 (Spouse, if filing)	KARIE First Name		DREEN dle Name	SCHULER Last Name				
United States Bar	nkruptcy Cour	t for the: DIS	STRICT OF	MONTANA				
Case number (if known)	19-60044						☐ Check if this is	s an
(ii kiiowii)							amended filing	9
Official Form	106D							
Schedule D:	Credito	rs Who I	Have Cla	ims Secured	by Pro	perty		12/15
1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all secure claim, list the creditor has a	tors have claick this box ar in all of the in t All Secured claims. If creditor separ particular claible, list the claims.	ims secured and submit this information be red Claims a creditor has rately for each im, list the ot	I by your pros s form to the elow.	one secured ore than one	Schedules. Colum Amou		hing else to report on the Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1				e property that	ę	134,283.79	\$142,700.00	
MR COOPER			secures the	claim: MILY DWELLING		1134,203.73	Ψ142,700.00	
Creditor's name 8950 CYPRESS Number Street	WATERS B		SINGLE FA	WILT DWELLING				
COPPELL City Who owes the dek Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a community	ot? Check or Debtor 2 only the debtors a	219 Code ne.	Continge Unliquid Disputed Nature of lie An agree Statuton Judgme	ated	ply. h as mortga n, mechanic	age or secured	l car loan)	
Date debt was inc	•	008	Last 4 digits	of account number	. 0 0	47		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$134,283.79

Debtor 2 BLAINE ANTHONY SCI KARIE DOREEN SCHU		Case number (if known)19-60044			
Part 1: Additional Page After listing any entries sequentially from the pro	on this page, number them evious page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2 SANTANDER CONSUMER USA Creditor's name PO BOX 660633	Describe the property that secures the claim: 2008 INFINITY QX56	secures the claim: \$14,913.00 \$10,52			
DALLAS TX 75266 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musure) Judgment lien from a lawsuit Other (including a right to offset)	s mortgage or secured	car loan)		
Date debt was incurred	Last 4 digits of account number	9514			

Add the dollar value of your entries in Column A on this page. Write that number here:

£4.40.40C

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$149,196.79

\$14,913.00

Fill in this info	ormation to iden	tify your ca	se:						
Debtor 1	BLAINE First Name	ANTHONY Middle Name	SCHULER Last Name						
Debtor 2 (Spouse, if filing)	KARIE First Name	DOREEN Middle Name	SCHULER Last Name						
United States Bar	nkruptcy Court for the	: DISTRICT (OF MONTANA						
Case number (if known)	19-60044				С	Check if this amended filir			
Official Form	106E/F						.9		
Schedule E/	F: Creditors V	Who Have	Unsecured Claim	าร			12/15		
claims. List the of on <i>Schedule A/B</i> : Do not include any If more space is not on this page. On the	Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims								
1. Do any credit	ors have priority un	secured claim	s against you?						
✓ No. Go to									
claim. For eac show both pric more space is	ch claim listed, identifority and nonpriority a	y what type of omeganism. As munsecured claim	reditor has more than one p claim it is. If a claim has bo uch as possible, list the clain s, fill out the Continuation P	th priorit	y and nonpriority am habetical order acco	nounts, list that coording to the cre-	laim here and ditor's name. If		
(For an explan	nation of each type of	claim, see the	instructions for this form in	the instru	uction booklet.				
					Total claim	Priority amount	Nonpriority amount		
2.1									
Priority Creditor's Name	e		Last 4 digits of account n	umber					
Number Street			When was the debt incurr	ed?		_			
			As of the date you file, the	claim i	s: Check all that ap	ply.			
			Contingent Unliquidated						
City	State ZIP	Code	Disputed						
ш	Debtor 2 only the debtors and anoth	her	Type of PRIORITY unsecution Domestic support oblig Taxes and certain othethe Claims for death or perintoxicated Other. Specify	ations r debts y	ou owe the governm	nent			
□ No □ Yes									

Debtor 1 BLAINE ANTHONY SCHU Debtor 2 KARIE DOREEN SCHULE	
Part 2: List All of Your NONP	RIORITY Unsecured Claims
 Yes List all of your nonpriority unsecure If a creditor has more than one nonpriority type of claim it is. Do not list claims all 	this part. Submit this form to the court with your other schedules. d claims in the alphabetical order of the creditor who holds each claim. rity unsecured claim, list the creditor separately for each claim. For each claim listed, identify what ready included in Part 1. If more than one creditor holds a particular claim, list the other creditors in inpriority unsecured claims, fill out the Continuation Page of Part 2.
4.1 BENEFIS HOSPITAL Nonpriority Creditor's Name 500 15TH AVENUE SOUTH Number Street GREAT FALLS MT 59405	\$655.11 Last 4 digits of account number 6 0 7 3 When was the debt incurred? 08/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
GREAT FALLS MT 59405 City State ZIP Coo Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
4.2 BENEFIS HOSPITAL Nonpriority Creditor's Name 1101 26TH ST SOUTH Number Street	\$1,050.16 Last 4 digits of account number 4 2 2 8 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
GREAT FALLS MT 59405 City State ZIP Coo Who incurred the debt? Check one. Debtor 1 only Debtor 2 only M Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify

Debtor 1 BLAINE ANTHONY SCHULER Debtor 2 KARIE DOREEN SCHULER	Case number (if known) _ 19-60044	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		
	Last A Balla of account country	\$446.76
CBI Inc. Nonpriority Creditor's Name	Last 4 digits of account number1 _ 6 _ 9 _ 2	
PO BOX 31213	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	Disputed	
BILLINGS MT 59107 City State ZIP Code	Time of NONDRIGHTY impossing distance	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Collecting for - MONTANA DAKOTA UTLITIES	
Is the claim subject to offset? No		
☑ No ☐ Yes		
4.4		\$408.00
COLLECTION BUREAU SERVICES	Last 4 digits of account number706	
Nonpriority Creditor's Name 212 EAST SPRUCE	When was the debt incurred? 04/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
MISSOULA MT 59807	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - GREAT FALLS CLINIC	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		\$4,980.00
CREDIT ASSOCIATES	Last 4 digits of account number 0 7 9 1	Ψ+,500.00
Nonpriority Creditor's Name	When was the debt incurred? 13-14	
1308 12TH AVENUE SOUTH Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
CREAT FALLS MT 50405.0000	Disputed	
GREAT FALLS MT 59405-0000 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Company is introduced, onen i neco oboth	
✓ No		
□ Yes		

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$8,349.74 CREDIT ASSOCIATES Last 4 digits of account number 0 8 1 0 Nonpriority Creditor's Name When was the debt incurred? PO BOX 6099 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 59406-0000 **GREAT FALLS** MT ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **MEDICAL** Is the claim subject to offset? **☑** No Yes 4.7 \$63.66 CREDIT COLLECTION SERVICES Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 12/2017 **72 S CÁNTON ST** As of the date you file, the claim is: Check all that apply. Street Number Contingent Unliquidated Disputed **NORWOOD** MA 02062 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - FARMERS INS GROUP Is the claim subject to offset? ✓ No ☐ Yes 4.8 \$37,923.00 **CREDIT SYSTEMS** Last 4 digits of account number 0 5 3 9 Nonpriority Creditor's Name When was the debt incurred? 2014-2015 **PO BOX 875** As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **HELENA** MΤ 59624-0000 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - BENIFIS HOSPITAL Is the claim subject to offset? **☑** No Yes

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.9 \$31.00 **CREDIT SYSTEMS** Last 4 digits of account number Nonpriority Creditor's Name 02/16 When was the debt incurred? **PO BOX 1088** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 76004 **ARLINGTON** TΧ City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Collecting for - RADIOLOGY OF MT Is the claim subject to offset? **☑** No Yes 4.10 \$71.00 **CREDIT SYSTEMS** Last 4 digits of account number 2 6 2 4 Nonpriority Creditor's Name When was the debt incurred? 2015-2018 1277 COUNTRY CLUB Street As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **FORT WORTH** TX 76112 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - RADIOLOGY MONTANA Is the claim subject to offset? ✓ No ☐ Yes 4.11 \$60.00 **CREDIT SYSTEMS INTERNATIONAL** Last 4 digits of account number 9 5 4 2 Nonpriority Creditor's Name When was the debt incurred? 05/2018 **PO BOX 1088** As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **ARLINGTON** TX 76004 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - RADIOLOGY MONTANA Is the claim subject to offset? **☑** No Yes

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.12 \$7,777.95 **DAVID & KAREN TUSS** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 08/2018 722 5TH AVE SOUTH Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 59405 **GREAT FALLS** MT City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **CONSTRUCTION DEBT** Is the claim subject to offset? **☑** No Yes 4.13 \$68.00 **EMBARK CREDIT UNION** Last 4 digits of account number 972 Nonpriority Creditor's Name When was the debt incurred? 11/18 PO BOX 2649 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **GREAT FALLS** MΤ 59405 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.14 \$2,213.95 **GUSTAFSON LAW OFFICE** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2017 400 SOUTH MAIN ST As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **CONRAD** MΤ 59425 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt П Collecting for - MARTIN & LAUREEN YAKELEWICZ Is the claim subject to offset? **☑** No Yes

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$8,349.74 INTERSTATE COUNSELING Last 4 digits of account number 0 8 1 0 Nonpriority Creditor's Name When was the debt incurred? 124 1ST AVENUE SOUTH #22 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 59403-0000 **GREAT FALLS** MT ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Collecting for - RADIOLOGY MONTANA, CENTRAL MT LAB Is the claim subject to offset? **☑** No Yes 4.16 \$2,056.74 JSP MANAGEMENT INC Last 4 digits of account number 2 9 7 6 Nonpriority Creditor's Name When was the debt incurred? 1283 COLLEGE PARK DR As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **DOVER** DE 19904 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Collecting for - DEXYP-FDEX** Is the claim subject to offset? **☑** No ☐ Yes 4.17 \$5,322.00 LGDI, INC Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 06/2018 PO BOX 1521 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **GREAT FALLS** MΤ 59403 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for -BRADLEY PINSONNEAULT Is the claim subject to offset? **☑** No Yes

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.18 \$2,581.00 MONTANA FEDERAL CREDIT UNION Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2011 **540 SMELTER AVE NE** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 59404 **GREAT FALLS** MT ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes 4.19 \$1,323.33 PINNACLE CREDIT SERVICES Last 4 digits of account number 6 1 6 5 Nonpriority Creditor's Name 06/2012 When was the debt incurred? 135 INTERSTATE BLVD As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **GREENVILLE** SC 29615 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Collecting for - VERIZON WIRELESS** Is the claim subject to offset? **☑** No ☐ Yes 4.20 \$3,457.25 PREMIER HOLDINGS Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 08/2017 903 N BOWSER RD #250 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed RICHARDSON TX 75081 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only П Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt П Collecting for - R&S SUPPLY Is the claim subject to offset? **☑** No Yes

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.21 \$32,174.11 PROTECH STEEL, LLC Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **2712 DAKOTA LANE** Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed 59404 **GREAT FALLS** MT City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **ROOFING** Is the claim subject to offset? **☑** No Yes 4.22 \$12,664.24 RAUCH-MILLIKEN INTERNATIONAL Last 4 digits of account number 2 6 5 2 Nonpriority Creditor's Name When was the debt incurred? PO BOX 8390 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **METAIRIE** LA 70011 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **ADVERTISING** Is the claim subject to offset? ✓ No ☐ Yes 4.23 \$391.00 **Rocky Mountain Credit Union** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 04/13 1627 WEST MAIN As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **BOZEMAN** MΤ 59715 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only \square Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for - DR DAVID ROHRER Is the claim subject to offset? **☑** No Yes

Debtor 1 Debtor 2	BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER	Case number (if known) _ 19-60044				
Part 2:	2: Your NONPRIORITY Unsecured Claims Continuation Page					
rait 2.	Tour NONFRIORITT Offsecu	ned Claims Continuation Fage				
	ig any entries on this page, number the	em sequentially from the	Total claim			
previous p	page.					
4.24			\$114.19			
US BANK	•	Last 4 digits of account number 8 4 5 2	· · · · · · · · · · · · · · · · · · ·			
Nonpriority C	Creditor's Name	When was the debt incurred? 12/2018				
300 CEN	TRAL AVE Street	As of the date you file, the claim is: Check all that apply.				
Number	Street	☐ Contingent				
		Unliquidated				
		─ ☐ Disputed				
GREAT F	FALLS MT 59401 State ZIP Code					
•	red the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	1 only	Student loans				
☐ Debtor	· 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
☑ Debtor	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts				
☐ At leas	st one of the debtors and another	Other. Specify				
☐ Check	if this claim is for a community debt	OVERDRAFT CKING ACCT				
Is the clair	n subject to offset?					
✓ No						
☐ Yes						
4.25						
4.25		-	Unknown			
	ARGO BANK	Last 4 digits of account number 8 4 9 5				
PO BOX	Creditor's Name 51963	When was the debt incurred? 12/2016				
Number	Street	As of the date you file, the claim is: Check all that apply.				
		Contingent				
		Unliquidated				
LOS ANG	SELES CA 90051	Disputed				
City	State ZIP Code	Type of NONPRIORITY unsecured claim:				
	red the debt? Check one.	☐ Student loans				
ш	1 only	Obligations arising out of a separation agreement or divorce				
	· 2 only · 1 and Debtor 2 only	that you did not report as priority claims				
	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
_	if this claim is for a community debt	Other. Specify				
_	•	RePO OF AUTO				
	n subject to offset?					
✓ No ☐ Yes						
☐ Yes						

Debtor 1 BLAINE ANTHONY SCHULER

Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated		6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$132,531.93
	6j.	Total. Add lines 6f through 6i.	6j.	<u>\$132,531.93</u>

Fill in this	s information to i	dentify your case:					
Debtor 1	BLAINE First Name	ANTHONY Middle Name	SCHULER Last Name				
Debtor 2 (Spouse, if f	KARIE First Name	DOREEN Middle Name	SCHULER Last Name				
United State	es Bankruptcy Court fo	r the: DISTRICT OF I	MONTANA				
Case number (if known)	er <u>19-60044</u>			☐ Check if amende	this is an d filing		
Official Fo	orm 106G						
Schedule	e G: Executory	/ Contracts and	d Unexpired L	eases	12/15		
correct information of the top of	mation. If more spac any additional page		additional page, fill d case number (if kr	ogether, both are equally responsible for tout, number the entries, and attach it own).			
•	•	•		edules. You have nothing else to report o	on this form		
			•	are listed on Schedule A/B: Property (Office			
is for (fo	 List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. 						
Perso	on or company with w	whom you have the co	ontract or lease	State what the contract or lease is for	or		
	IZON			CELL PHONE			
Name PO E	3OX 408			Contract to be ASSUMED			

NJ State **07101**ZIP Code

NEWARK City

Fill in this inf	ormation to ider			
Debtor 1	BLAINE First Name	ANTHONY Middle Name	SCHULER Last Name	
Debtor 2	KARIE	DOREEN	SCHULER	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the			
Case number (if known)	19-60044			Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

	✓ No ☐ Yes	
2.	Within the last 8 years, have you lived in a community property include Arizona, California, Idaho, Louisiana, Nevada, New Mexico	
	No. Go to line 3.	
	Yes. Did your spouse, former spouse, or legal equivalent live	with you at the time?
	No	
	☐ Yes	
3.	In Column 1, list all of your codebtors. Do not include your speperson shown in line 2 again as a codebtor only if that person creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Off <i>Schedule D, Schedule E/F, or Schedule G</i> to fill out Column 2.	is a guarantor or cosigner. Make sure you have listed the ficial Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:

Fill in this inforr	mation to identify	y your case:				
Debtor 1	BLAINE	ANTHONY	SCHULER			
	First Name	Middle Name	Last Name	_	Che	ck if this is:
Debtor 2	KARIE	DOREEN	SCHULER		_	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		ш	7 th amended ming
United States Bankruptcy Court for the:		DISTRICT OF MONTANA			A supplement showing postpetition chapter 13 income as of the following date	
Case number	19-60044					onapter to moome as of the following date
(if known)						MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

Fill in your employment information.		Debtor 1		Debtor 2 or non-filing	g spouse	
If you have more than one job, attach a separate page with information about	Employment status	☐ Employed✓ Not employed		☐ Employed✓ Not employed		
additional employers.	Occupation	TRUCK DRIVER		HOMEMAKER		
Include part-time, seasonal, or self-employed work.	Employer's name	SELF				
Occupation may include student or homemaker, if it applies.	Employer's address	Number Street		Number Street	_	
		City	State Zip Code	City	State Zip Code	
	How long employed the	here?				

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Dobtor 1

For Dobtor 2 or

				non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00

Official Form 106l Schedule I: Your Income page 1

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$0.00 \$0.00 List all payroll deductions: \$0.00 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. 5g. \$0.00 \$0.00 5q. Union dues 5h. Other deductions. \$0.00 \$0.00 5h. + Specify: Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$0.00 5g + 5h.Calculate total monthly take-home pay. Subtract line 6 from line 4. \$0.00 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a 8a \$214.83 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation \$0.00 8d \$0.00 8e. Social Security \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. 8q. Pension or retirement income \$0.00 \$0.00 8h. Other monthly income. 8h. • \$0.00 Specify: \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$214.83 \$0.00 Calculate monthly income. Add line 7 + line 9. \$214.83 \$0.00 \$214.83 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$214.83 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? None.

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Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER 19-60044 Case number (if known) 8a. Attached Statement (Debtor 1) **SELF-ROOFER Gross Monthly Income:** \$3,283.00 Expense Category Amount MISC MISC \$3,068.17 **Total Monthly Expenses** \$3,068.17 **Net Monthly Income:** \$214.83

G	Fill in this inform	nation to ider	ntify your case:			Oh a ala if	Aleia ia	
	Debtor 1	BLAINE	ANTHONY	SCHU	JLER	Check if	tnis is: amended filing	
	200101	First Name	Middle Name	Last Na		Ш	upplement showing	postpetition
	Debtor 2	KARIE	DOREEN	SCHU	JLER	cha	pter 13 expenses as	s of the
	(Spouse, if filing)	First Name	Middle Name	Last Na	ame	TOILC	owing date:	
	United States Bankı	ruptcy Court for the	he: DISTRICT OF M	ONTANA		MM	/ DD / YYYY	_
	Case number (if known)	19-60044						
0	fficial Form 10)6J				J		
S	chedule J: Yo	our Expens	es					12/15
co na	rrect information. I	f more space is er (if known). A	ible. If two married pe needed, attach anothe nswer every question.	-				
		ibe Your Hou	sehold					
1.	Is this a joint cas	e?						
	No	Debtor 2 live in a	separate household?	2, Expense	s for Separate Housel	nold of Deb	otor 2.	
2.	Do you have depo		☐ No ☑ Yes. Fill out this info	ormation	Dependent's relation		Dependent's	Does dependent
	Debtor 2.	i aliu –	for each dependent.		SON		<u>age</u> 24	live with you? No
	Do not state the donames.	ependents'			DAUGHTER		10	Yes ∏ Yes ∏ No ∀es ✓ ✓ Yes
					DAUGHTER		9	No Yes
					SON		7	□ No ▼ Yes
					SON		6	□ No □ V Yes
3.	Do your expense expenses of peopyourself and you	ole other than	✓ No ☐ Yes					<u></u>
Ŀ	Part 2: Estima	ate Your Ong	oing Monthly Expe	enses				
to		of a date after t	ankruptcy filing date un he bankruptcy is filed. e.					
	•		ash government assist on Schedule I: Your In	•			Your expens	es
4.			xpenses for your resident				4.	\$1,008.05
	If not included in	line 4:						
	4a. Real estate ta	axes					4a	
	4b. Property, hor	neowner's, or ren	iter's insurance				4b	
	4c. Home mainte	enance, repair, ar	nd upkeep expenses				4c	\$200.00
	4d Homeowner's	s association or c	condominium dues				4d	

Debtor 1 **BLAINE ANTHONY SCHULER** Debtor 2 KARIE DOREEN SCHULER Case number (if known) 19-60044 Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$150.00 6b. Water, sewer, garbage collection 6b. \$85.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$380.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$1,000.00 Childcare and children's education costs 8. \$300.00 Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 10. \$75.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train \$450.00 12. fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$20.00 magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance \$108.00 15c. 15d. Other insurance. Specify: 15d. **16. Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 2008 INFINITY \$563.65 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: ___ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you.

Specify:

19.

Debtor 1 Debtor 2		BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER	Case number (if known)	19-60044
		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	_
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	. Specify:	21. +_	
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$4,639.70
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$4,639.70
23.	Calculate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$214.83
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$4,639.70
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$4,424.87)
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you file	e this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No.				
	=	Ves. Explain here: None.		

Debtor 1 Debtor 2 BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER		Case number (if known) 19-60044				
2. Addit	ional Dependents:	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?		
		DAUGHTER	2	□ No - ☑ Yes		
		SON	_ 1	□ No - ☑ Yes		

Fill in this information to identify your case:				
Debtor 1	BLAINE	ANTHONY	SCHULER	
	First Name	Middle Name	Last Name	
Debtor 2	KARIE	DOREEN	SCHULER	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: DISTRICT OF	MONTANA	
Case number	19-60044			☐ Check if this
(if known)				amended filir

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$142,700.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$15,745.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$158,445.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$149,196.79
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	40.00
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$132,531.93
	Your total liabilities	\$281,728.72
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$214.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$4,639.70

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	BLAINE ANTHONY KARIE DOREEN S		Case number	(if known) _	19-60044	
Ē	Part 4: Answer These	Answer These Questions for Administrative and Statistical Records				
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?						
	No. You have nothing to✓ Yes	report on this part of the form. Check	this box and submit this form	to the court	with your other sc	hedules.
7.	What kind of debt do you ha	ve?				
	Your debts are primarily consumer debts. Consumer debts are those "incurr family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statisti		,			
	Your debts are not prim this form to the court with	arily consumer debts. You have not your other schedules.	thing to report on this part of t	he form. Che	ck this box and s	ubmit
8.		Current Monthly Income: Copy your OR, Form 122B Line 11; OR, Form 12	•	from		(\$52.13)
9.	Copy the following special c	ategories of claims from Part 4, line	e 6 of Schedule E/F:			
				Total claim		
	From Part 4 on Schedule E/I	F, copy the following:				
	9a. Domestic support obligat	ions. (Copy line 6a.)			\$0.00	
	9b. Taxes and certain other of	debts you owe the government. (Copy	line 6b.)		\$0.00	
	9c. Claims for death or person	onal injury while you were intoxicated.	(Copy line 6c.)		\$0.00	
	9d. Student loans. (Copy line	e 6f.)			\$0.00	

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

Fill in this information to identify your case:				
Debtor 1	BLAINE	ANTHONY	SCHULER	
	First Name	Middle Name	Last Name	
Debtor 2	KARIE	DOREEN	SCHULER	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for	r the: DISTRICT OF I	MONTANA	
Case number 19-60044				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have re	ead the summary and schedules filed with this declaration and that they are
true and correct.	
X /s/ BLAINE ANTHONY SCHULER	X /s/ KARIE DOREEN SCHULER
BLAINE ANTHONY SCHULER, Debtor 1	KARIE DOREEN SCHULER, Debtor 2
Date <u>01/25/2019</u>	Date <u>01/25/2019</u>
MM / DD / YYYY	MM / DD / YYYY

Fill in this information to identify your case:				
Debtor 1	BLAINE	ANTHONY	SCHULER	
	First Name	Middle Name	Last Name	
Debtor 2	KARIE	DOREEN	SCHULER	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: DISTRICT OF	MONTANA	
Case number	19-60044			☐ Check if this
(if known)				amended fill

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1.	What is your current marital status? ☑ Married ☐ Not married
2.	During the last 3 years, have you lived anywhere other than where you live now?
	⋈ No
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
3.	Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	✓ No Yes. Make sure you fill out <i>Schedule H: Your Codebtors</i> (Official Form 106H).

Debtor 1 Debtor 2		BLAINE ANTHONY SCHULE KARIE DOREEN SCHULER	R	Case nur	Case number (if known) _ 19-60044					
Part 2: Explain the Sources of Y			our Income							
4.	Fill in th	have any income from employr e total amount of income you rece re filing a joint case and you have	isinesses, including part	t-time activities.	lendar years?					
	□ No ☑ Yes	. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ry 1 of the current year until i filed for bankruptcy:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips					
			Operating a business		Operating a business					
For	the last	calendar year:	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips					
(January 1 to December 31, 2018)		December 31,	Operating a business		Operating a business					
For	the cale	ndar year before that:	☐ Wages, commissions, bonuses, tips	\$44,929.00	Wages, commissions, bonuses, tips					
(Jar	nuary 1 to	December 31, <u>2017</u>)	Operating a business		Operating a business					
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ry 1 of the current year until	Wages, commissions, bonuses, tips	\$0.00	Wages, commissions, bonuses, tips					
	·	, ,	Operating a business		Operating a business					
For	the last	calendar year:	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions,					
(Jar	nuary 1 to	December 31, 2018)	Operating a business		bonuses, tips Operating a business					
For	the cale	ndar year before that:	☐ Wages, commissions, bonuses, tips	\$44,929.00	☐ Wages, commissions, bonuses, tips					
(Jar	nuary 1 to	December 31, 2017)	Operating a business		Operating a business					

Debtor 2 KARIE DOREEN SCHULER	.	Case nur	mber (if known)19-6004	4
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$0.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
Forth dark about the con-	_			
For the last calendar year:	Wages, commissions, bonuses, tips	\$19,698.00	Wages, commissions, bonuses, tips	
(January 1 to December 31,	Operating a business		Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips	\$44,929.00	Wages, commissions, bonuses, tips	
(January 1 to December 31, 2017)	Operating a business		Operating a business	
unemployment; and other public benefit parand gambling and lottery winnings. If you a Debtor 1. List each source and the gross income from No Yes. Fill in the details.	are in a joint case and you	have income that you re	eceived together, list it only	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
From January 1 of the current year until the date you filed for bankruptcy:	0			
For the last calendar year: (January 1 to December 31, 2018)	19698.00			
For the calendar year before that: (January 1 to December 31, 2017) YYYY	44929.00			
1111				

		BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER	Case number (if known) 19-60044						
ŀ	Part 3:	List Certain Payments You Made Before You Filed fo	r Bankruptcy						
		r Debtor 1's or Debtor 2's debts primarily consumer debts?							
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. C "incurred by an individual primarily for a personal, family, or househo							
		During the 90 days before you filed for bankruptcy, did you pay any	creditor a total of \$6,425* or more?						
		☐ No. Go to line 7.							
		Yes. List below each creditor to whom you paid a total of \$6,425 total amount you paid that creditor. Do not include paymer child support and alimony. Also, do not include payments to	its for domestic support obligations, such as						
		* Subject to adjustment on 4/01/19 and every 3 years after that for c	ases filed on or after the date of adjustment.						
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts.							
		During the 90 days before you filed for bankruptcy, did you pay any	creditor a total of \$600 or more?						
		✓ No. Go to line 7.							
		Yes. List below each creditor to whom you paid a total of \$600 o creditor. Do not include payments for domestic support ob Also, do not include payments to an attorney for this bankru	ligations, such as child support and alimony.						
7.	Insiders corporat agent, in	year before you filed for bankruptcy, did you make a payment on include your relatives; any general partners; relatives of any general pons of which you are an officer, director, person in control, or owner of cluding one for a business you operate as a sole proprietor. 11 U.S.C child support and alimony.	artners; partnerships of which you are a general partner; 20% or more of their voting securities; and any managing						
	✓ No ☐ Yes.	List all payments to an insider.							
8.		year before you filed for bankruptcy, did you make any payments d an insider?	or transfer any property on account of a debt that						
	Include	payments on debts guaranteed or cosigned by an insider.							
	✓ No ☐ Yes.	List all payments that benefited an insider.							

Debtor Debtor	Debtor 1 BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER			_		Case number ((if known)1	19-60044	ı
Part	4:	Identify Le	gal Acti	ons, Repos	sessions, and Foreclosure	S			
Lis	st all s		cluding per	sonal injury ca	were you a party in any lawsuit, ses, small claims actions, divorces			-	-
□		s. Fill in the deta	ils.						
Case ti	tle			Nature of the	case Cou	rt or agency			Status of the case
соок	V B	LAINE SCHUL	.ER	DEBT COLI		TICE COURT	<u> </u>		— Pending
					Coun	Name			On appeal
Case n	umbe	r CV-2018-10	68		Numb	oer Street			Concluded
					GRE	EAT FALLS	МТ		
					City	ZATTALLO	State	ZIP Code	
Ch □ ☑] No.	all that apply and Go to line 11. Fill in the info							
					Describe the property		Date	V	alue of the property
WELL	S FA	RGO			2005 DODGE RAM 3500		01/08/2	2.18	
Creditor's	s Nam	е			_				
PO BC					Explain what happened				
Number	Oll	56 1			Property was repossessed.				
					Property was foreclosed.				
LOS A	NGE	LES	CA	90051	Property was garnished.				
City			State	ZIP Code	Property was attached, seiz	zed, or levied.			
					Describe the property		Date	V	alue of the property
		/STEMS			BANK ACCOUNT		07/03/2	2018	\$57.48
Creditor's									
PO BC Number	Str				Explain what happened				
					Property was repossessed.				
					Property was foreclosed.				
HELEN	NΑ		MY	59604	Property was garnished.				
City			State	ZIP Code	Property was attached, seiz	zed, or levied.			
					Describe the property		Date	V	alue of the property
LGDI, Creditor's		e			BANK ACCOUNT		10/05/2	2018	\$923.89
РО ВС									
Number	Str	eet			Explain what happened				
					 Property was repossessed. Property was foreclosed. 				
CDEA	T C^	116	R#T	E0400	☐ Property was foreclosed. ✓ Property was garnished.				
GREA City	ı FA	LLO	MT State	59403 ZIP Code	Property was attached, seiz	zed, or levied.			

	otor 1 otor 2	BLAINE ANTHONY SCHU KARIE DOREEN SCHULE		Ca	ase number (if kn	own) 19-6004 4	1	
11.				any creditor, including a bank or financial institution, set off any ayment because you owed a debt?				
	✓ No	s. Fill in the details.						
12.		1 year before you filed for ba ors, a court-appointed receive			essession of an a	ssignee for the b	penefit of	
	✓ No □ Ye							
P	art 5:	List Certain Gifts and	Contribution	s				
13.	Within	2 years before you filed for b	ankruptcy, did y	ou give any gifts with a total	value of more th	an \$600 per pers	son?	
	☑ No □ Ye	s. Fill in the details for each gif	t.					
14.		2 years before you filed for b charity?	ankruptcy, did y	ou give any gifts or contribu	tions with a total	value of more th	nan \$600	
	□ No ☑ Ye	s. Fill in the details for each gif	t or contribution.					
		tributions to charities ore than \$600		Describe what you contribu	uted	Date you contributed	Value	
PR.	AISE T	ABERNACLE				2018	\$1,316.00	
Cha	rity's Nam	е						
Num	nber St	reet		-			_	
City		State	ZIP Code	-				
	art 6:	List Certain Losses						
	Within	1 year before you filed for ba lisaster, or gambling?	nkruptcy or sinc	e you filed for bankruptcy, d	lid you lose anyth	ning because of t	theft, fire,	
	✓ No □ Ye	s. Fill in the details.						

Debtor 1 Debtor 2			_	NY SCHULEF SCHULER	Case number ((if known) 19-60044	
Part 7: List Certain Payments or			rtain P	ayments or	Transfers		
					iptcy, did you or anyone else acting on your behalf p nkruptcy or preparing a bankruptcy petition?	ay or transfer any pro	perty to
Ir	nclude	any attorney	/s, bankı	ruptcy petition p	preparers, or credit counseling agencies for services rec	quired for your bankrupt	cy.
_	□ No ☑ Yes	. Fill in the	details.				
	les A. Who W	Smith Law	/ Office)	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Box 4				_	01/14/2019	\$1,500.00
Numbe	er Stre	eet			_		
Heler City	na		MT State	59604 ZIP Code	_		
Email o	or websit	e address			_		
Person	Who M	ade the Paym	ent, if Not	You	_		
	RLES .	A SMITH L (as Paid	.AW OF	FICE	Description and value of any property transferred CASH	Date payment or transfer was made	Amount of payment
1524	BEAV	'ERHEAD I	RD			01/11/2019	\$1,500.00
Numbe					_		
HELE	ENA		MT	59602	_		
City			State	ZIP Code			
Email o	or websit	e address			_		
Person	Who M	ade the Paym	ent, if Not	You	_		
	DVISI				Description and value of any property transferred CREDIT COUNSELING	Date payment or transfer was made	Amount of payment
Person	i vvno vv	as Palu				01/14/2019	\$19.52
Numbe	er Stre	eet			_	01/14/2019	_
					_		
City			State	ZIP Code			
Email o	or websit	e address			-		
Person	Who M	ade the Paym	ent, if Not	You	_		

Debto Debto			_	NY SCHULER SCHULER	l .	Case number (i	f known) _	19-60044	
	-	-	-		ptcy, did you or anyone else vith your creditors or to mak		-	sfer any pro	perty to
[Do not inc	clude any p	ayment	or transfer that	you listed on line 16.				
[✓ No Yes.	Fill in the d	etails.						
	-		-		uptcy, did you sell, trade, or se of your business or finan		roperty to	anyone, ot	her than
		-			s made as security (such as gr nave already listed on this stat	-	st or mortg	age on your	property).
	✓ No Yes.	Fill in the d	etails.						
		years befo beneficiar	-		ruptcy, did you transfer any called asset-protection device		I trust or s	similar devid	ce of which
[]	✓ No Yes.	Fill in the d	etails.						
Par	rt 8:	List Cert	ain Fi	nancial Acc	ounts, Instruments, Sa	fe Deposit Boxes, a	nd Stora	age Units	
20. V	Within 1	year before	you fi	led for bankru	ptcy, were any financial acco	•			your
I	nclude ch	necking, sa	vings, n	•	ed? or other financial accounts; cel ciations, and other financial in:	·	s in banks	, credit unior	ns, brokerage
[□ No ☑ Yes.	Fill in the d	etails.						
					Last 4 digits of account number	Type of account or instrument	was o	account closed, moved, nsferred	Last balance before closing or transfer
		REDIT UNI	ON		-				(****
1500	RIVER	DR N			XXXX- <u>4</u> <u>8</u> <u>7</u> <u>2</u>		1	1/2018	(\$68.00)
Numbe	er Stree	t			-	☐ Money market ☐ Brokerage			
GRE.	AT FALI	LS	MT State	59405 ZIP Code	-	Other			
IIS R	SANK				Last 4 digits of account number	Type of account or instrument	was o	account closed, moved, nsferred	Last balance before closing or transfer
		al Institution			- XXXX-8 4 5 2	Checking	12	/18/2018	(\$84.99)
300 (Numbe	CENTRA er Stree					Savings Money market Brokerage			
005	AT E 4 / :			50.405	-	Other			
GKE	AT FALI	LS	MT	59405	-	_ -			

	otor 1 otor 2	BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER Case number (if known) 19-60044	
21.	-	now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository ırities, cash, or other valuables?	
	✓ No ☐ Yes	. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?	
		. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any property you borrowed from, are storing for, in trust for someone.	
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 10:	Give Details About Environmental Information	
-or	the purp	ose of Part 10, the following definitions apply:	
ł	hazardoι	nental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of s or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, statutes or regulations controlling the cleanup of these substances, wastes, or material.	
		ns any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites.	
		<i>is material</i> means anything an environmental law defines as a hazardous waste, hazardous substance, toxic e, hazardous material, pollutant, contaminant, or similar item.	
₹ер	ort all no	otices, releases, and proceedings that you know about, regardless of when they occurred.	
24.	Has any law?	governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental	
	☑ No □ Yes	. Fill in the details.	
25.		ou notified any governmental unit of any release of hazardous material?	
	✓ No ☐ Yes	. Fill in the details.	
26.	Have you	ou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and	
	✓ No ☐ Yes	. Fill in the details.	

Debtor 1 BLAINE ANTHONY SCHU Debtor 2 KARIE DOREEN SCHULE		Case number (if known)19-60044
Part 11: Give Details About Yo	our Business or Connections to A	ny Business
27. Within 4 years before you filed for b business?	ankruptcy, did you own a business or ha	ve any of the following connections to any
A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the	loyed in a trade, profession, or other activity of company (LLC) or limited liability partnershing executive of a corporation e voting or equity securities of a corporation. Go to Part 12.	nip (LLP)
MBLB HOLDINGS INC	Describe the nature of the business ROOFING CONTRACTOR	Employer Identification number Do not include Social Security number or ITIN.
Business Name 1721 BLACK EAGLE RD Number Street	Name of accountant or bookkeeper SELF	Dates business existed
GREAT FALLS MT 59414 City State ZIP Code	-	From <u>02/2018</u> To <u>12/2018</u>
ROOFERS OF MONTANA Business Name 1721 WIREMILL RD	Describe the nature of the business ROOFING CONTRACTOR	Employer Identification number Do not include Social Security number or ITIN. EIN:
Number Street	Name of accountant or bookkeeper SELF	Dates business existed
BLACK EAGLE MT 59414 City State ZIP Code 28. Within 2 years before you filed for b all financial institutions, creditors, c		From 04/2013 To 12/2018 nent to anyone about your business? Include
✓ No Ves. Fill in the details below		

Debtor 1 Debtor 2	KARIE DOREEN SCHULER				Case number (if k	known)	19-60044
Part 12:	: Sign Below						
that answe property by	the answers on this Statement of Final ers are true and correct. I understand the y fraud in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 3571.	nat mak	ing a fa	alse statement, co	ncealing property,	or obt	aining money or
	AINE ANTHONY SCHULER E ANTHONY SCHULER, Debtor 1 01/25/2019	ŀ		RIE DOREEN SO DOREEN SCHULI 01/25/2019		_	
Did you att	tach additional pages to Your Statement	t of Fina	ancial i	Affairs for Individ	als Filing for Bank	ruptcy	(Official Form 107)?
✓ No ☐ Yes							
Did you pa	y or agree to pay someone who is not a	an attori	ney to	help you fill out b	ankruptcy forms?		
☑ No ☐ Yes. N	lame of person						ptcy Petition Preparer's Notice, ignature (Official Form 119).

Fill in this inf	ill in this information to identify your case:					
Debtor 1	BLAINE	ANTHONY	SCHULER			
	First Name	Middle Name	Last Name			
Debtor 2	KARIE	DOREEN	SCHULER			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: DISTRICT OF I	MONTANA			
Case number	19-60044					
(if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.								
Identify the cre	editor and the property that is collateral	•	Did you claim the property as exempt on Schedule C?					
Creditor's name:	MR COOPER	Surrender the property. No Retain the property and redeem it. Yes						
Description of property securing debt:	SINGLE FAMILY DWELLING	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: DEBTORS WILL SEEK MODIFICATION OF LOAI	N					
Creditor's name:	SANTANDER CONSUMER USA	Surrender the property. No Retain the property and redeem it. Yes						
Description of property securing debt:	2008 INFINITY QX56	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:						

Debtor 1 Debtor 2	BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER		Case number (if known)	19-60044
Part 2:	List Your Unexpired Persona	l Property Leases		
fill in the i	nexpired personal property lease that your nformation below. Do not list real estate You may assume an unexpired person	e leases. Unexpired leases are	e leases that are still in effe	ct; the lease period has not
Desci	ribe your unexpired personal property le	eases		Will this lease be assumed?
	•			□ No ☑ Yes
	penalty of perjury, I declare that I have in al property that is subject to an unexpire	•	ny property of my estate tha	at secures a debt and
	AINE ANTHONY SCHULER E ANTHONY SCHULER, Debtor 1	X /s/ KARIE DOREEN S KARIE DOREEN SCHUL		
_	01/25/2019 //M / DD / YYYY	Date <u>01/25/2019</u> MM / DD / YYYY	-	

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF MONTANA BUTTE DIVISION

In re BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER

Case No.	19-60044		
Chapter	7		

		'
	DISCLOSURE OF COMPENSATION OF ATTORN	EY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the att that compensation paid to me within one year before the filing of the petition in bank services rendered or to be rendered on behalf of the debtor(s) in contemplation of c is as follows:	ruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$1,500.00
	Prior to the filing of this statement I have received	\$1,500.00
	Balance Due	\$0.00
2.	The source of the compensation paid to me was:	
	✓ Debtor Other (specify)	
3.	The source of compensation to be paid to me is:	
	✓ Debtor Other (specify)	
4.	✓ I have not agreed to share the above-disclosed compensation with any other prassociates of my law firm.	erson unless they are members and
	☐ I have agreed to share the above-disclosed compensation with another person associates of my law firm. A copy of the agreement, together with a list of the n compensation, is attached.	•
5.	In return for the above-disclosed fee, I have agreed to render legal service for all as	pects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in bankruptcy;	determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and plan w	hich may be required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing	g, and any adjourned hearings thereof;

B2030	(Form	2030)	١,	(12/15)	
DZU3U	(LOIII)	2030) ((12/13)	

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/25/2019 /s/ Charles A. Smith

Date Charles A. Smith

Charles A. Smith Law Office 1524 Beaverhead Rd Helena, MT 59602 Phone: (406) 442-4840 Bar No. 1436

/s/ BLAINE ANTHONY SCHULER /s/ KARIE DOREEN SCHULER

BLAINE ANTHONY SCHULER KARIE DOREEN SCHULER